



Lisa Stefanovsky, M.Ed. Health Officer

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Medical Director

## Sign-In Sheet

By printing my name below, I agree I have none of the indicated symptoms or exposures

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## **Employee Screening**

Risk of Covid-19

## Have you experienced any of the following?

$\square$ New onset cough or worsening cough		COVID-19
☐ Shortness of breath		CORONAVIRUS DISEASE 2019
□ Sore throat	488.00	
$\square$ International travel to Europe, China, South Ko	rea, or Iran in the past	14 days
☐ Domestic travel to New York, Colorado, Washii	ngton, California or any	states with high activity
$\square$ Been in contact with anyone exhibiting any of t	these symptoms	

If you answered YES to any of these, contact your supervisor before proceeding to work.

<u>Thank you</u> for protecting your co-workers, the community, and yourself. <u>Together</u>, we can help prevent the spread of Covid-19!





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Medical Director

## **Employee Screening Key**

Risk of Covid-19

Have you experienced any	/ of the following?	?
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<ul> <li>Fever currently or in the past 24 hours</li> <li>Go home, contact health provider, self-monitor or isolate; can return to work 24 hour after symptom subsides.</li> </ul>
<ul> <li>New onset cough or worsening cough</li> <li>Go home, contact health provider, self-monitor or isolate; can return to work 24 hour after symptom subsides.</li> </ul>
<ul> <li>Shortness of breath</li> <li>Go home, contact health provider, self-monitor or isolate; can return to work 24 hour after symptom subsides.</li> </ul>
<ul> <li>International traveled to Europe, China, South Korea, or Iran in the past 14 days (</li> <li>Supervisor confirm travel location and verify risk with CD or Epi team; encourage staff to monitor for symptoms.</li> </ul>
<ul> <li>Domestic travel to New York, Colorado, Washington, or California or any other state with high activity in the past 14 days</li> <li>Supervisor confirm travel location and verify risk with CD or Epi team; encourage staff to monitor for symptoms.</li> </ul>
<ul> <li>Been in contact with anyone exhibiting any of these symptoms</li> <li>Self-monitor and report if they begin exhibiting symptoms.</li> </ul>

If they answered YES to any of these, they must contact their supervisor before proceeding to work.

Verify employees are signing the sign in sheet prior to entering the office.

Together, we can help prevent the spread of Covid-19!